

Please type a plus sign (+) inside this box -> +

Declaration

PTO/SB/01 (12-97) Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

		Att rn y Dock t Numb r		434-226			
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION			First Named Inventor		Thomas Tobin		
			COMPLETE IF KNOWN				
(37 CFR 1.63)		Application Number		09 / 865,175			
Declaration Submitted with Initial Filing		Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date		May 24, 2001		
	OR		Group Art Unit		1614		
			Examiner Name				

## As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: NOVEL LONG ACTING, REVERSIBLE VETERINARY SEDATIVE AND ANALGESIC AND METHOD OF USE the specification of which is attached hereto OR was filed on (MM/DD/YYYY) 05/24/2001 as United States Application Number or PCT International Application Number 09/865,175 (if applicable). and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or dany PCT international application having a filing date before that of the application on which priority is claimed. **Certified Copy Attached?** Foreign Filing Date Priority Prior Foreign Application Country Not Claimed (MM/DD/YYYY) Number(s) YES Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below Application Number(s) Filing Date (MM/DD/YYYY) 60/206,625 05/24/2000 Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



<del></del>	PTO/SB/01 (12-97)
ease type a plus sign (+) inside this box 🔫 🛨	Approved for use through 9/30/00. OMB 0651-0032
asso type a plas digit (*) moles this set.	Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLA	<u>RATION —</u>	- Utility	טוט	esign	Fale	11.	hhi	Icatio			
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filing date of this application.											
U.S. Parent Application or PCT Parent				Parent Filing Date			Parent Patent Number (if applicable)				
Number				(MM/DD/	1111)	(п аррпсаше)					
			:								
Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.											
As a named inventor, I he	As a named inventor. I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent										
and Trademark Office connected therewith:   Customer Number  OR				) name/registration number listed below				Place Customer Number Bar Code Label here			
Name		Registration Number			Name			Registration Number			
, , , , , , , , , , , , , , , , , , ,		Trem.									
Additional registered	practitioner(s) named o	n supplemental	Registered I	Practitioner Inf	ormation she	et PTO/S	SB/02C	attached heret	0.		
Direct all corresponde	ence to: 🗹 Custom	ner Number Code Label		1009	OR			ndence addre			
Name											
Address											
Address				г	т	1					
City	.,		1,0.50	State		ZIP	(0.50)	252.0770			
Country		Telephon	e (859)	252-0889		Fax		252-0779			
to although the books are all the	statements made herein further that these statem prisonment, or both, und t issued thereon.	ante wara mada	with the kni	wishi annalwr	ilitui taise sta	tements	and the	like so made c			
Name of Sole or	First Inventor:			A petition	n has been	filed for	r this ur	nsigned inve	ntor		
Given Na	Given Name (first and middle [if any]) Family Name or Surname										
Thomas (NMI)											
Inventor's Signature		ren	WY.	Jen		<u>~''</u>		mps 2	4200		
Residence: City	Residence: City Lexington		KY	Country	US		k	Citizenship	US		
Post Office Address	1242 Summit Drive, Lexington, Kentucky 40502										
Post Office Address			+	<del> </del>	<del> </del>		1		-25		
City	Lexington	State		Zip	40484			Country	US		
Additional inventors are being named on the 1_supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached here											